# **National Minority SA/HIV Prevention Initiative**

# **Group Dosage Form Administration Guide**

## Cohorts 7&8

For program participants, dosage is a measure of the *type* and *amount* of contact that an individual has in each direct encounter with the program. Because different participants can have different types and amounts of contact (due to absences, participation in different program components, or dropping out), it is critical to collect dosage information for all participants of direct services to accurately assess program effects.

#### **Group Dosage Data**

The collection of dosage data from services delivered in a group format is an important aspect of our data collection effort. The Group Dosage Form applies *only* to encounters in which participants receive direct, in-person services that are delivered in a group format (i.e. more than a single participant is present at the service session). For direct services delivered in an individual setting (i.e. one-on-one format), dosage should be reported using the Individual Dosage Form instead of the Group Dosage Form.

Dosage data should be collected for services delivered to multiple participants during a single encounter, such as a group education session attended by more than one participant. A single Group Dosage Form should be completed for a group session since all of the participants attending the group session receive the same service types lasting the same amounts of time (duration). If a participant is enrolled in the program but absent from a specific group service encounter, their unique participant identification number should **not** appear on the Group Dosage Form for that encounter.

Group dosage data will be collected on all services **provided directly by the grantee or through contractual arrangements that are fully or partially funded through the HIV grant** and delivered in a group format (that is, to multiple participants during one service encounter). No dosage data should be collected for services that participants receive outside of the funded program. For example, if a participant attends a group education session provided by a third-party that is not part of the grantee's organization and does not receive any funds from the HIV grant, dosage data should not be recorded for the participant.

The following sections describe the variables used in the Group Dosage Form as well as provide general instructions for completing the form.

# **Group Service Types**

For group service encounters, common service types have been identified to encompass the range of services provided across interventions. Some service types have been defined broadly to embrace related services that are specific to just a few interventions. For dosage recording purposes, each of the defined services is considered to be *mutually exclusive*. For example, suppose that during a one-hour

group education session, 20 minutes are spent on substance abuse education and the remaining 40 minutes are dedicated to HIV education. The dosage record should list the two service codes separately and report durations of 20 and 40 minutes, respectively, for the two service types. Table 1 provides definitions for the service types included in the Group Dosage Form. For conceptual and practical reasons, the service types are organized into two major groups: 1) Group Services, and 2) Group Health Care Services. Group Health Care Services are categorized separately from other Group Services for CSAP's record-keeping purposes only.

Typically, health care services are, by definition, delivered on an individual (i.e. one-on-one) basis. However, CSAP recognizes that grant sites may deliver the same service (e.g. testing) to multiple individuals on the same day or occasion. In order to avoid the burden of filling out Individual Dosage Forms for each of the participants receiving the service on that day or occasion, grantees are allowed to complete a single Group Dosage Form for the service and list the Participant IDs of all individuals that received the service on the same day or occasion. It is important to keep in mind that in order to use a single Group Dosage Form for multiple individuals receiving health services on the same day or occasion, all of the individuals should have received the same health care service and the duration of the encounter should be approximately the same for each individual.

Table 1
Group Service Types and Definitions

GROUP SERVICES	DEFINITION
Support Group	Facilitated self-help group sessions that bring together individuals sharing a common problem or life experience. Participants help one another by sharing their knowledge, experiences, and/or coping strategies. These sessions are structured to provide participants with knowledge and emotional support needed to deal with a family member's or their own substance abuse, HIV infection, and/or associated problems. Included in this category are 12-step programs such as AA and NA.
Group Counseling/Therapy	Formal counseling provided in a group setting by a trained, licensed therapist to address the psychological or social problems and issues of the participants.
Skills Building Training/Education	Training sessions on specific personal or interpersonal skills that have been identified as important to successful individual and social development. This service is typically based on a curriculum. This category includes skills development training that targets competencies such as communication, decision-making, problem solving, conflict resolution, refusal skills, as well as more general life skills. Also included are program sessions that specifically address self-efficacy, self-esteem, and self-confidence building. Peer education skills training sessions are also included.
Health Education Classes/Sessions	Information provided in a group setting on health topics and behaviors such as nutrition, diet, exercise, maturation and physical development, disease screening, sexually transmitted diseases (STDs), drug education, etc. May include information to reduce the risk of substance abuse, HIV infection and other STDs, and related behaviors.
Hepatitis Education	Educational information about hepatitis that is presented and discussed in groups, such as symptoms, treatment, vaccines and prevention of hepatitis A, B, and C.

GROUP SERVICES	DEFINITION
HIV Education	Educational information about HIV/AIDS that is presented and discussed in a group, such as symptoms, treatment, and prevention.
STD Education	Educational information that is presented and discussed in a group on common sexually transmitted diseases (STDs), symptoms, treatment, and prevention. This category does not include HIV/AIDS and hepatitis A, B, and C. HIV and hepatitis education should be listed separately using the appropriate service codes (see Table 2).
Substance Abuse Education	Educational information about substance abuse that is presented and discussed in a group, such as symptoms, treatment, and prevention.
Cultural Enhancement Activities	Group activities or program sessions designed to develop cultural awareness, identity, and pride among participants. Activities may include lessons on cultural history and traditions, rites of passage, and social functions that are culturally focused (e.g., Kwanzaa ceremony or tribal celebration).
Alternative Activities	Group activities designed to take place in a drug-free, safe environment and to be appealing to participants. The intent of these activities is often to contribute to enrichment or support skills development by providing an opportunity to engage in stimulating and rewarding endeavors with others. Activities in this category may be loosely structured (e.g., field trips, outings, and midnight basketball), or more structured (e.g., team sports, art classes, or a theatrical production).
Other Group Services	This is the <i>default</i> category for group level services that do not fit elsewhere, such as social events, awards ceremonies, and group projects that are not considered by the grantee to be an alternative activity. This category also includes meal functions that are designed to be part of the overall program intervention.
GROUP HEALTH CARE SERVICES	DEFINITION
HIV Testing	Collection of a biological sample (e.g., blood) for the purposes of testing for HIV infection. Only the time spent with the program participant should be counted for dosage. HIV testing that is provided anonymously should <i>not</i> be recorded.
Primary Health Care Services	General medical or health care provided by a health care professional (e.g., physician, nurse, therapist) who works for the CSAP-funded program as an employee or volunteer. This category does not include hepatitis testing and vaccinations since HIV grant funds cannot be used for this health care service.
Other Health Care Services	Medical or health care not covered under HIV testing or primary health care that is provided by a health care professional who works for the CSAP-funded program as an employee or volunteer.

There is no expectation that a program would provide services in all of the above service types. However, it is important that each group service encounter be attached to one of these service types.

**Group sessions with multiple service types.** A group service encounter may involve more than one service (e.g., skill building training, health education, and cultural enhancement activities). For group

sessions that involve multiple service types, each service type should be recorded with an estimate of time spent on each. The Group Dosage Form provides room for recording up to three service types delivered during one group service encounter. If more than three services were provided, a second dosage form must be completed.

If a grantee finds that recording dosage for these group service encounters places too much burden on staff, the staff responsible for data collection should identify the services that are typically provided in group sessions and define a time estimate for each service. After the appropriate Service Codes have been identified, the approximate Duration Code should calculated. This type of allocation can be applied to all group service encounters. That is, all group service sessions for the program would be given the same Service and Duration Codes. The Group Dosage Form would then act as an attendance sheet with each participant ID being entered for all of those participants who were present for each group service encounter. Although this approach would not be as accurate as determining the dosage codes for each session, over the course of the entire program the dosage data would reflect approximately how much exposure participants receive for each service. In either case, precautions should be taken to maintain consistency in the definition of Service and Duration Code assignments.

**Meals and social time.** Activities that are considered to be downtime or free time should *not* be recorded as dosage unless the activity is considered to be an integral component of the intervention. If these activities are considered to be part of the intervention, they may best fit under Alternative Activities or Other Group Services.

**Time spent on data collection instruments.** Time that participants spend on local data collection and/or administering CSAP's Youth and Adult Questionaire should *not* be recorded as program dosage. Evaluation activities are not considered to be a program service.

Table 2 on the following page lists the Group and Health Care Services Codes to be used in recording and reporting dosage data.

Table 2
Group Service Codes

GROUP SERVICES	CODE
Support Group	16
Group Counseling/Therapy	17
Skills Building Training/Education	18
Health Education Classes/Sessions	19
Hepatitis Education	20
HIV Education	21
STD Education	21a
Substance Abuse Education	22
Cultural Enhancement Activities	23

GROUP SERVICES	CODE
Alternative Activities	24
Other Group Services	25
GROUP HEALTH CARE SERVICES	CODE
HIV Testing	11
Primary Health Care Services	12
Other Health Care Services	13

#### **Service Duration**

It is necessary to measure how much exposure participants have to each service type. The exposure is measured by the amount of time in *minutes* an individual participates in each service type. The number of minutes serves as the Duration Code. Therefore, each recorded Service Code also has a corresponding Duration Code. The Duration Code should be *rounded up to the closest 5-minute interval*. For example, a service lasting 23 minutes would have a Duration Code of 25.

# **General Instructions for Completing the Group Dosage Form**

Below are instructions and definitions for completing the Group Dosage Form. Ensuring the accuracy of the form will help CSAP determine the best approaches for future programs and can help grantees track how their resources are being used.

Table 3
General Instructions for Completion of Form

ITEM	DESCRIPTION
Encounter Date	The date on which the service encounter occurred.
Grant ID	The award number issued to the grantee by CSAP.
Grp. Type (Study Design Group Type)	Pre-filled with "1" indicating that this is an intervention group since no dosage data is collected for comparison groups.
Adm. Frmt. (Administration Format)	Pre-filled with "2" indicating a group service delivery format as opposed to an individual format which requires the completion of the Individual Dosage Form.
Group Service Code	Circle the appropriate code for each type of service received on the encounter being recorded (see Table 2). This form provides space for recording up to three service types.
Duration Code	Record the number of minutes the corresponding service lasted by rounding up to the nearest 5-minute interval (see Service Duration section).
Participant ID Numbers	Should include each participant present at the group service encounter. A program participant's identification number should be the same on all survey and dosage data records collected for that participant. This number is used to link all of the data collected from this participant at different times; it is therefore crucial that the number is used consistently on all data records. This form provides space for recording up to 80 attendees.

## Timing and Scope of Dosage Data Collection

Dosage data should be collected for all group service encounters with participants during which a service or multiple services are provided. This includes participants who attend a single group session funded by the HIV grant. For participants who have multiple service encounters, dosage data collection should begin with the first service encounter and continue through the last service encounter. <sup>1</sup>

#### **Dosage Data Submission**

Completed dosage forms should be entered online through the data entry section of the Prevention Management Reporting and Training System (PMRTS) Portal. Questions regarding data collection or submission to CSAP should be addressed to the PMRTS Technical Assistance Hotline, available Monday through Friday, from 9 am to 6 pm Eastern Standard Time via telephone to 1-888-DITIC-4-U, or via email to DITICSupport@kitsolutions.net.

No Dosage Data Should be Collected from Comparison/Control Participants

<sup>&</sup>lt;sup>1</sup> The analysis of dosage data will link those data with survey data collected from each participant to assess the effectiveness of each type of intervention and combinations of interventions.